

8-3-06

PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|---|-----------------------------|-------------------------------|----------|
| Application Number | 10/806,481 | | |
| | Filing Date | 03/22/2004 | |
| | First Named Inventor | Nimrod Agmon | |
| | Art Unit | 2825 | |
| | Examiner Name | Magid Y. Dimyan | |
| Total Number of Pages in This Submission | | Attorney Docket Number | MP0404.I |

ENCLOSURES (check all that apply)

| | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return receipt postcard. |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|---------------------|----------------------------------|-----------------|--------|
| Firm | Harness, Dickey & Pierce, P.L.C. | | |
| Signature | <i>Michael D. Wiggins</i> | | |
| Printed Name | Michael D. Wiggins | | |
| Date | August 2, 2006 | Reg. No. | 34,754 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

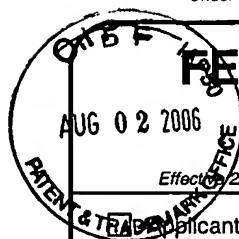
| | | | |
|------------------------------|----------------------|-------------------------------|------------------------------|
| Typed or printed name | Maggie Purvis | Express Mail Label No. | EV 855 009 624 US (8/2/2006) |
| Signature | <i>Maggie Purvis</i> | Date | August 2, 2006 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL **for FY 2006**

Effective 2/8/2006. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 250

Complete if Known

Application Number 10/806,481
 Filing Date 03/22/2004
 First Named Inventor Nimrod Agmon
 Examiner Name Magid Y. Dimyan
 Art Unit 2825
 Attorney Docket No. MP0404.1

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account:

Deposit Account Number

08-0750

Deposit Account Name

Harness, Dickey & Pierce, PLC

The Director is authorized to: (check all that apply)

☒ Charge any underpayment ☒ Credit any overpayments
☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|----------|----------|----------|----------|------------------------|----------|
| 1011 | 300 | 2011 | 150 | Utility filing fee | |
| 1012 | 200 | 2012 | 100 | Design filing fee | |
| 1013 | 200 | 2013 | 100 | Plant filing fee | |
| 1014 | 300 | 2014 | 150 | Reissue filing fee | |
| 1005 | 200 | 2005 | 100 | Provisional filing fee | |

SUBTOTAL (1)

(\$ 0

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 20 ** | 0 | 0 | 0 |
| Independent Claims | 3 ** | 0 | 0 |
| Multiple Dependent | | | 0 |

Large Entity Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description |
|----------|----------|----------|----------|--|
| 1202 | 50 | 2202 | 25 | Claims in excess of 20 |
| 1201 | 200 | 2201 | 100 | Independent claims in excess of 3 |
| 1203 | 360 | 2203 | 180 | Multiple dependent claim, if not paid |
| 1204 | 200 | 2204 | 100 | ** Reissue independent claims over original patent |
| 1205 | 50 | 2205 | 25 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2)

(\$ 0

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|----------|----------|----------|----------|--|----------|
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet. | |
| 1053 | 130 | 1053 | 130 | Non-English specification | |
| 1812 | 2,520 | 1812 | 2,520 | For filing a request for reexamination | |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 | 120 | 2251 | 60 | Extension for reply within first month | 120 |
| 1252 | 450 | 2252 | 225 | Extension for reply within second month | |
| 1253 | 1020 | 2253 | 510 | Extension for reply within third month | |
| 1254 | 1,590 | 2254 | 795 | Extension for reply within fourth month | |
| 1255 | 2,160 | 2255 | 1080 | Extension for reply within fifth month | |
| 1401 | 500 | 2401 | 250 | Notice of Appeal | |
| 1402 | 500 | 2402 | 250 | Filing a brief in support of an appeal | |
| 1403 | 1000 | 2403 | 500 | Request for oral hearing | |
| 1452 | 500 | 2452 | 250 | Petition to revive - unavoidable | |
| 1453 | 1500 | 2453 | 750 | Petition to revive - unintentional | |
| 1462 | 400 | 1462 | 400 | Petition fee under 37 CFR 1.17(f) | |
| 1463 | 200 | 1463 | 200 | Petition fee under 37 CFR 1.17(g) | |
| 1464 | 130 | 1464 | 130 | Petition fee under 37 CFR 1.17(h) | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17 (q) | |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | |
| 1809 | 790 | 2809 | 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 1801 | 790 | 2801 | 395 | Request for Continued Examination (RCE) | |

Other fee (specify) Terminal Disclaimer

130

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$250

4. SEARCH/EXAMINATION FEES

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description |
|----------|----------|----------|----------|-------------------------|
| 1111 | 500 | 2111 | 250 | Utility Search Fee |
| 1112 | 100 | 2112 | 50 | Design Search Fee |
| 1113 | 300 | 2113 | 150 | Plant Search Fee |
| 1114 | 500 | 2114 | 250 | Reissue Search Fee |
| 1311 | 200 | 2311 | 100 | Utility Examination Fee |
| 1312 | 130 | 2312 | 65 | Design Examination Fee |
| 1313 | 160 | 2313 | 80 | Plant Examination Fee |
| 1314 | 600 | 2314 | 300 | Reissue Examination Fee |

SUBTOTAL (4)

(\$0

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|---------------------------|-----------------------------------|----------------|-----------|--------------|
| Name (Print/Type) | Michael D. Wiggins | Registration No. (Attorney/Agent) | 34,754 | Telephone | 248-641-1600 |
| Signature | <i>Michael D. Wiggins</i> | Date | August 2, 2006 | | |

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